

## **MEDICATION ASSISTED TREATMENT PROGRAMS**

### **.01 AUTHORITY**

2015 Wisconsin Act 55

### **.02 GENERAL STATEMENT**

Medication Assisted Treatment Programs (MAT) include the use of medications in combination with counseling and behavioral therapies effective in the treatment of Opioid Use Disorders (OUD). Funds are used for contracts to provide MAT services to clients. The Division of Community Corrections has funding for individuals who may not qualify for Medicaid, are willing to participate in the program and would benefit from these services. In areas where DOC does not have a contracted provider, the client may be connected with community treatment providers utilizing other payer sources (Medicaid, private insurance).

### **.03 ELIGIBILITY**

1. Clients with a history of Opioid use or misuse are eligible.
2. Clients will receive a SUD assessment by the provider upon referral and also be reviewed for medical suitability.
3. Clients on community supervision or releasing from prison are eligible.

### **.04 REFERRAL PROCESS**

1. For clients releasing from prison, see the "Pre-Release Planning" section of ECRM. The agent shall work with the institution social worker to facilitate participation in MAT as screening indicates in connection with the Pre-Release Planning process.
2. For clients on community supervision, screening for opioid history is conducted at intake, in conjunction with a Supervision Level Review, or during the course of investigating a violation. See those sections of ECRM for further details concerning screening. If screening comes back affirmative for opioid use history, or there is a history of opioid use indicated from other sources, discuss with the client options for MAT participation. Utilize the cautionary field in COMPAS to flag opioid history.
3. Discuss type of coverage (Medicaid, private insurance, DOC funds) with the client. If DOC funds are needed and a DOC contract is in place, complete the following referral steps.
  - If accepted the agent emails referral and required forms to the provider.
  - The Regional POGS PPA will manage acceptance and rejection into the program.
  - Email the e1336 to the Regional POGS PPA and cc status keeper and designated staff responsible for data entry into the Program Data Collection System (PDCCS).

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- The agent completes an e-1336 in WICS choosing requested MAT provider prior to release, or as soon as a treatment provider and willingness to participate is determined. The client shall complete a DOC 3761A MAT Consent to Participate.
4. If DOC funds are needed and there is not a DOC contract in place, complete the following referral steps.
    - The agent shall consult with the supervisor and obtain approval to request POGS funds. The agent shall then contact the POGS Coordinator and /or designee to ensure the purchase is appropriate and funds are available.
    - The agent shall then complete the DOC-501 and submit to the POGS Coordinator.
    - In the event a vendor is not in PDCS, the vendor shall be entered into PDCS as a provider. The entry shall be completed by the POGS Coordinator/designee.
    - The agent completes an e-1336 choosing requested MAT provider prior to release, or as soon as a treatment provider and willingness to participate is determined. The client shall complete a DOC 3761A MAT Consent to Participate.
    - Email the e1336 to the Regional POGS PPA and cc status keeper and designated staff responsible for data entry into the Program Data Collection System (PDCS).
    - The Regional POGS PPA will manage acceptance and rejection into the program.
    - If accepted the agent emails referral and required forms to the provider.
  5. See the "Referrals to Outside Agencies" section of ECRM for additional referral procedures.

**.05 AGENT RESPONSIBILITIES**

1. Coordinate release planning with institution social worker and MAT referral upon or as shortly after release as possible. Continuity of care during this transition is imperative.
2. Discuss MAT options with client, discuss willingness to participate, and educate client concerning referral process and treatment. Ensure all efforts, offers of treatment and referrals are NOTED in COMPAS.
3. Notify Regional POGS PPA and designated staff for PDCS entry concerning client termination and reason for termination.
4. Collaborate with community partners and providers to ensure the participant adheres to program guidelines.
5. Stay apprised of client's participation in treatment.
6. Collaborate with the client and contact the service provider to arrange initial appointment, or subsequent dose if receiving initial dose while incarcerated (prison or jail), for MAT screening/treatment.

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7. In any situation where the client is being transferred, sending agent shall ensure advance planning is done to maintain continuity of care. If for any reason, treatment will be disrupted during the transfer process, Opioid Advisory Team (OAT) is available for consultation if circumstances are warranted.

Additional information can be found in the Medication Assisted Treatment Manual on MyDOC.